

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 23, 2004 8:00 am**  
**Secretary of State**

02-23-2004 90322 001 \*\*\*300.00

**DOCUMENT # P03000110451**

1. Entity Name  
**SUCCESS POS, INC.**



Principal Place of Business  
**1280 SW 36TH AVE  
SUITE 201  
POMPAÑO BEACH, FL 33069**

Mailing Address  
**1280 SW 36TH AVE  
SUITE 201  
POMPAÑO BEACH, FL 33069**

**66402878**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01212004

Chg-P

CR2E034 (10/03)

4. FEI Number

**20-0356315**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**GLANTZ, RONALD P ESQ  
GLANTZ & GLANTS PA  
7951 SW 6TH ST SUITE 200  
PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME **D**  
STREET ADDRESS **MCKINNEY, LORI**  
CITY-ST-ZIP **1280 SW 36TH AVE SUITE 201  
POMPAÑO BEACH, FL 33069**

TITLE ☐ Delete  
NAME **D**  
STREET ADDRESS **TARR, DAVID**  
CITY-ST-ZIP **1280 SW 36TH AVE SUITE 201  
POMPAÑO BEACH, FL 33069**

TITLE ☐ Delete  
NAME **O- President - CEO**  
STREET ADDRESS **Fidherly, Stephen**  
CITY-ST-ZIP **1280 SW 36th Ave 201  
Pompano Beach, FL 33069**

TITLE ☐ Delete  
NAME **O- Vice President**  
STREET ADDRESS **Yost, Thomas**  
CITY-ST-ZIP **1280 SW 36th Ave 201  
Pompano Beach, FL 33069**

TITLE ☐ Delete  
NAME **O- Secretary/Treasurer**  
STREET ADDRESS **Rosenberg, Keith A.**  
CITY-ST-ZIP **1280 SW 36th Ave  
Pompano Beach, FL 33069**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE: Keith A. Rosenberg**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/22/2004**

Date

**954-968-6900**

Daytime Phone #